

## MISSOURI INDIVIDUAL INCOME TAX RETURN — RESIDENTS/NONRESIDENTS WITH OTHER STATE INCOME AND ACTIVE DUTY MILITARY — SHORT FORM

2002 FORM MO-1040C

						_									
LAS	T NAN	IE FIRST NAME		MIDDLE INITIAL	DECEASE 200		SECURIT	Y NUMBER	R	SOFTWA VENDOR ( (Assigned by	CODE				
SPO	OUSE'	S LAST NAME FIRST NAME		MIDDLE INITIAL	DECEASE 200		SPOUSE'S SOCIAL SECURITY NUMBER			01					
IN C	CARE	OF NAME (ATTORNEY, EXECUTOR, PERSONAL REPRES	SENTATIVE, ETC.)	COUNTY OF RES	DENCE		SCHOOL DISTRICT NO.								
PRE	SENT	ADDRESS (INCLUDE APARTMENT NO. OR RURAL ROL	ITE)	CITY, TOWN, OR	POST OFF	ICE, STATE,	AND ZIP	CODE		<u> </u>					
PLE	ASE C	HECK THE APPROPRIATE BOXES THAT APPLY TO YOUR	SELF / SPOUSE.			FOR A FAS	STER R	EFUND:	E-FILE OR V	VEBFILE					
AG	E 65 C	R OLDER BLIND 100% DI	SABLED NON-OBL	IGATED SPOUSE											
	YOURS	ELF 🗆 SPOUSE 🗀 YOURSELF 🗀 SPOUSE 🗀 YOUR	SELF SPOUSE YOURS	ELF SPOUSE			DO	R USE	ONLY						
	1.	Federal adjusted gross income from your 20 (See worksheet in instructions.)			. 1	Yo	urself	00	Sp	oouse	00				
빌	2.	Any state income tax refund included in your		00	_		00								
INCOME	3.	Subtract Line 2 from Line 1. This is your Mis		00	=		00								
ĭ∣		Total Missouri Adjusted Gross Income —	ı		0	0									
	5.	Income percentages: Divide Line 3 by Line 4													
		(The total of the two must equal 100%. Roun				5	<u> </u>	%	9	<b>6</b>					
	6.	Mark your filing status box below. Enter the app													
		A Single-\$2,100 Claimed as dependent of	n another person's fed. r	eturn- <b>\$0</b> 🗀 Ma	rried- <b>\$4</b> ,	200 6	3		0	0					
SN	7.	Tax from federal return. (Do not enter amou from Form W-2(s)— <b>NOT</b> federal tax withheld		Single—ma	ax. of \$5 nax. of \$	,000; 10,000 <b>7</b>	, +		0	0					
힏	8.	Missouri standard deduction or itemized deduc	ctions. Single — \$4.700:	Married Filing a											
DEDUCTIONS		B. Missouri standard deduction or itemized deductions. Single — \$4,700; Married Filing a  Combined Return or Qualifying Widow(er) — \$7,850; If claimed as a dependent,  65, or blind, get amount from federal return. If itemizing, see back of form													
DE	9.	Number of dependents you claimed on your federal return													
	10	(Do not include yourself or your spouse.)													
		0. Long-term care insurance deduction       10 + 00         1. Total Deductions — Add Lines 6 through 10       11 = 00													
╡		Taxable Income — Subtract Line 11 from Li					_		0	0					
	13.	Multiply Line 12 by the percentages on Line	5 for vou			Yo	urself		Sp	oouse					
		and your spouse.			. 13		00								
ဒ္ဓ	14.	Use table on back to figure tax on amounts fr	om Line 13 for you and	your spouse .				00	00						
TAXES		Resident credit (Attach Form MO-CR and	•	A.	. 15			00 %	1						
ᅵ	16.	$\label{thm:missouri} \mbox{Missouri income percentage} \ \ \mbox{\bf (Attach Form}$	. 16			%									
	17.	<b>Balance</b> ( <b>Resident</b> — Subtract Line 15 from ( <b>Missouri Income Percentage</b> — Multiply L	,	. 17			00			00					
_		Total Taxes. Add your tax and your spouse						_		00					
۵		Missouri tax withheld for you and your spouse	• ,		` '					00					
됤		Any Missouri estimated tax payments you m								00					
빏	21.	. <b>Total Payments</b> — Add Lines 19 and 20													
S/H	22.	If Line 21 (Total Payments) is more than Line			•										
뉟	00	overpayment) here. (If Line 21 is less than	• •	,			2			00					
뿔	23.	Amount from Line 22 that you want applied t	o <b>next year's</b> taxes	Ch VIV.	ildren's	Veterans			y Home Delivered	00 Missouri N	Vational				
<b>PAYMENTS/REFUND</b>	24.	You may donate part of your overpaid amou additional payments to any or all of the trust	funds listed to the		Children's Trust Fund Veterans Trust Fund Elderly Home Delivered Meals Trust Fund					Missouri N Guard Tru	:				
$\dashv$		right. Enter the amount of your donation in the		.   24	00		00		00	1	00				
임	25.	Subtract Lines 23 and 24 from Line 22 and 6 Mail to: Department of Revenue, P.O. Box				REFL	IND 3	5		00					
ᆈ	26.	If Line 21 is less than Line 18, enter the diffe	rence here. You have	an amount due						- 00					
MAIL		Mail to: Department of Revenue, P.O. Box 329, Jefferson City, MO 65107-0329. AMOUNT YOU OWE 26													
4	The Department of Revenue may collect checks returned for insufficient or uncollected funds electronically.														
اس	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which he/she has any knowledge. As provided in Chapter 143, RSMo, a penalty of up to \$500 shall be imposed on any individual who files a frivolous return.														
품	I authorize the Director of Revenue or delegate to discuss my return and attachments with the preparer or any member of the preparer's firm.   YES NO PAID PREPARER'S PHONE ( )														
딝	SIGNATURE DATE PAID PREPARER'S SIGNATURE FEIN, SSN,														
SIGNATURE				<u> </u>											
Si	SPOUS	SPOUSE'S SIGNATURE DAYTIME TELEPHONE PAID PREPARER'S ADDRESS AND ZIP CODE  ( )													

## **MISSOURI ITEMIZED DEDUCTIONS** Complete this section only if you itemized deductions on your federal return. (See the instructions.) Attach a copy of your Federal Form 1040 (pages 1 and 2) and Federal Schedule A. 1. Total federal itemized deductions from Federal Form 1040, Line 38 ..... 00 2. 2002 (FICA) — yourself — Social security \$ \_\_\_\_\_ + Medicare \$ \_\_\_\_ 2 00 3. 2002 (FICA) — spouse — Social security \$ \_\_\_\_\_\_ + Medicare \$ \_\_\_\_\_ 3 00 4. 2002 Railroad retirement tax — yourself (Tier I and Tier II) \$ \_\_\_\_\_ + Medicare \$ \_\_\_\_ 4 00 5. 2002 Railroad retirement tax — spouse (Tier I and Tier II) \$ \_\_\_\_\_\_ + Medicare \$ \_ 5 00 00 6. 2002 Self-employment tax — Amount from Federal Form 1040, Line 29 ..... 6 00 00 10

NOTE: IF LINE 11 IS LESS THAN YOUR FEDERAL STANDARD DEDUCTION, SEE INSTRUCTIONS.

## WORKSHEET — STATE AND LOCAL INCOME TAXES

Complete this worksheet only if your federal adjusted gross income from Federal Form 1040, Line 35 is more than \$137,300 (\$68,650 if married filling separate). If your federal adjusted gross income is less than or equal to these amounts, do not complete this worksheet. See the instructions for the amount to enter on Line 10 above. Attach a copy of your Federal Itemized Deduction Worksheet (Page A-6 of Federal Schedule A instructions).

1.	Amount from Federal Itemized Deduction Worksheet, Line 3 (See page A-6 of Federal Schedule A instructions.) If \$0 or less, enter "0"	1	00
2.	Amount from Federal Itemized Deduction Worksheet, Line 9 (See page A-6 of Federal Schedule A instructions.)	2	00
3.	State and local income taxes from Federal Form 1040, Schedule A, Line 5	3	00
4.	Earnings taxes included on Federal Form 1040, Schedule A, Line 5	4	00
5.	Subtract Line 4 from Line 3.	5	00
6.	Divide Line 5 by Line 1	6	%
	Multiply Line 2 by Line 6		00
8.	Subtract Line 7 from Line 5. Enter here and on Line 10 above.	8	00

## 2002 TAX TABLE

If Missouri taxable income from Form MO-1040C, Line 13, is less than \$9,000, use the table to figure tax; if more than \$9,000, use worksheet below or use the online tax calculator at www.dor.state.mo.us/tax/personal/taxcalculator/

If Line 13 is			If Line 13 is			If Line 13 is		If Line 13 is		If Line 13 is			If Line 1	Line 13 is			
At least	But less than	Your tax is	At least	But less than	Your tax is	At least	But less than	Your tax is	At least	But less than	Your tax is	At least	But less than	Your tax is	At least	But less than	Your tax is
0	100	\$ 0	1,500	1,600	\$ 26	3,000	3,100	\$ 62	4,500	4,600	\$109	6,000	6,100	\$167	7,500	7,600	\$238
100	200	2	1,600	1,700	28	3,100	3,200	65	4,600	4,700	113	6,100	6,200	172	7,600	7,700	243
200	300	4	1,700	1,800	30	3,200	3,300	68	4,700	4,800	116	6,200	6,300	176	7,700	7,800	248
300	400	5	1,800	1,900	32	3,300	3,400	71	4,800	4,900	120	6,300	6,400	181	7,800	7,900	253
400	500	7	1,900	2,000	34	3,400	3,500	74	4,900	5,000	123	6,400	6,500	185	7,900	8,000	258
500	600	8	2,000	2,100	36	3,500	3,600	77	5,000	5,100	127	6,500	6,600	190	8,000	8,100	263
600	700	10	2,100	2,200	39	3,600	3,700	80	5,100	5,200	131	6,600	6,700	194	8,100	8,200	268
700	800	11	2,200	2,300	41	3,700	3,800	83	5,200	5,300	135	6,700	6,800	199	8,200	8,300	274
800	900	13	2,300	2,400	44	3,800	3,900	86	5,300	5,400	139	6,800	6,900	203	8,300	8,400	279
900	1,000	14	2,400	2,500	46	3,900	4,000	89	5,400	5,500	143	6,900	7,000	208	8,400	8,500	285
1,000	1,100	16	2,500	2,600	49	4,000	4,100	92	5,500	5,600	147	7,000	7,100	213	8,500	8,600	290
1,100	1,200	18	2,600	2,700	51	4,100	4,200	95	5,600	5,700	151	7,100	7,200	218	8,600	8,700	296
1,200	1,300	20	2,700	2,800	54	4,200	4,300	99	5,700	5,800	155	7,200	7,300	223	8,700	8,800	301
1,300	1,400	22	2,800	2,900	56	4,300	4,400	102	5,800	5,900	159	7,300	7,400	228	8,800	8,900	307
1,400	1,500	24	2,900	3,000	59	4,400	4,500	106	5,900	6,000	163	7,400	7,500	233	8,900	9,000	312
							Υοι	ırself		Sı	nouse		Fxam	nole	9,000		315

GURING TAX VER \$9,000

Yourself Spouse Example Missouri taxable income (Line 13) . . . . . 12,000 9.000 - \$ 9,000 \$ 9,000 3.000 = 6% 6% Х Х 6% Tax on income over \$9,000 . . . . . . . = \$ = \$ = \$ 180 Add \$315 (tax on first \$9,000) ..... + \$ 315 315 315 TOTAL MISSOURI TAX . . . . . = \$ = \$ 495 A separate tax must be computed for you and your spouse.

If more than \$9,000,

tax is \$315 PLUS 6% of excess over \$9,000.

Round to nearest whole dollar and enter on front of form, Line 14.

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This form is available upon request in alternative accessible format(s). TDD (800) 735-2966